765579

(Re	equestor's Name)	·
. (Ad	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Antioch Little L	_eague, Inc.	
DOCUMENT NUM	BER: 765579		
The enclosed Article	s of Amendment and fee are sub	mitted for filing.	
Please return all corn	espondence concerning this mat	ter to the following:	
		erly Conrad	
	(Name of	Contact Person)	
		ittle League, Inc.	
	(Firm	n/ Company)	
	7808 F	ranklin Road	
	(4	Address)	
	Plant City	, Florida 33565	
	(City/ Sta	te and Zip Code)	
		aboutdisney.com	ation)
For further informati	on concerning this matter, pleas	e call:	
Kimberly Conrad		at (813) 716.398	9
(Name	e of Contact Person)	(Area Code & Daytin	me Telephone Number)
Enclosed is a check i	for the following amount made p	payable to the Florida Departmen	t of State:
	☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 thassee, FL 32314	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 32301	r Circle

Articles of Amendment to Articles of Incorporation of

	Little League, Inc			
(Name of Corporation as cu		orida Dept. of St	<u>ate</u>)	
(Document N	765579 umber of Corporation (if	(known)		
Pursuant to the provisions of section 617.100 the following amendment(s) to its Articles of	96, Florida Statutes, this Incorporation:	,	Profit Corporation a	dopts
A. If amending name, enter the new name	of the corporation:			
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"	contain the word "cor," or "Co." may not be us	poration" or "inc sed in the name.	corporated" or the	
B. Enter new principal office address, if a	pplicable:	· · · · · · · · · · · · · · · · · · ·	ALE S	3
(Principal office address <u>MUST BE A STRI</u>	EET ADDRESS)		AH	2
				; ;
				Ţ.
C. Enter new mailing address, if applicab	<u>le:</u>		10F	(_,)
(Mailing address <u>MAY BE A POST OF</u>	FICE BOX)	<u></u>	DA S	
		7,		
D. If amending the registered agent and/o	r registered office addr	ess in Florida, en	iter the name of the	.
new registered agent and/or the new re			act the name of the	<u>.</u>
Name of New Registered Agent:				
				
New Registered Office Address:	(Florida str	reet address)	·····	
			, Florida	
	(Cit	99)	(Zip Code)	
New Registered Agent's Signature, if chan I hereby accept the appointment as register position.	ging Registered Agent: red agent. I am famili	ar with and acce	ept the obligations o	of the
_	Signature of New Regis	stered Agent, if ch	anging	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	Name	Address	Type of Action
Presid	Shawn Conrad	7808 Franklin Road Plant City, FL 33565	
			Add Remove
4804488			Add Remove
E. If amending (attach addit	z or adding additional Articles, enter coional sheets, if necessary). (Be specific	hange(s) here:	
	·		

The date of each amendment(s) adoption: 5-2209		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.	
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
Dated	5-22-09	
Signature	L Co 2	
(By	the chairman or vice chairman of the board, president or other officer-if directors	
	e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	
	Mimberly Conrad	
	(Typed or printed name of person signing)	
	Sec.	
	(Title of person signing)	

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